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INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	Alister Peter Reid
Title	Automatic Pet Door
Art Unit	
Examiner Name	
Attorney Docket Number	CPAGE.00010

I hereby revoke all previous powers of attorney given in the above-identified application.

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22,858

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☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	7 Feb 2005
Name	Alister Peter Reid	Telephone	01772-793793
Title and Company	Chairman, Reilor Holdings Limited		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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